

No arteries required ligation, torsion being sufficient. A gutta-serena splint was moulded to the front of the arm, the arm not straight, but forming a very obtuse angle at the elbow. The wound was brought together by the twisted suture, and cold-water dressing applied. The patient was narcotized with chloroform during the operation, and tolerated its use very well. She then took an opiate, and was put to bed. From the next day, she began to improve. She is three months advanced in pregnancy. On the 16th, most of the incisions had healed by adhesion. The patient continued to improve. Part of the wound remained open for several months, and from my not having taken away the entire amount of diseased bone, several small pieces separated and came away. In November, she was delivered of a fine boy, and soon after was discharged well, and with an arm capable of performing the motion of extension and flexion, volition and supination. The happy result of this case ought to induce others always to give this operation the preference when there is even a chance of saving the arm.

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ART. XI.—*Hæmatemesis from a Tumour of Varicose Veins on the Stomach and Disorgeryment of an Enlarged Spleen.* By G. B. HOTCHKISS, M. D., of Media, Pa.

THE patient in this case was a lad aged 10½ years, a son of my friend, Dr. J. Rowland, of this place.

He was an intelligent boy, of active and energetic habits, of a bilious temperament and sallow complexion, and had always been in delicate health, but had never suffered any severe illness since his infancy. When about six months of age he had an attack of intermittent fever, which, however, was not well marked; this left him with a very great enlargement of the spleen, which remained up to the time of his last illness, forming a tumour over the region of that organ.

At long intervals, from the age of six years upward, a small quantity of blood would be found on his pillow in the morning which could be traced to no cause, but during all this time his appetite, strength, and general health constantly improved. The hemorrhoidal veins were much enlarged from his infancy, and occasionally discharged blood. He suffered twice from a hoarseness amounting almost to total aphonia.

On Sunday, the 17th of February, ult., he was first attacked with hæmatemesis without any premonitory symptoms (his general health having been very good previously, except the hoarseness before mentioned), vomiting on that day a large amount of pure blood; and on that day and the next at least from two to three gallons of black tar-like fluid were discharged from the bowels, evidently decomposed blood mingled with mucus.

By the free use of astringents these discharges were checked, but the patient was left in a state of great prostration. Tonics and nourishing food were given, everything being cooled by ice before taken.

Under this treatment he seemed rapidly improving till the next Thursday, when the discharges reappeared, but with less violence and copiousness.

At this time we noticed that the tumour occupied by the spleen had disappeared, and that organ could not be felt at all. This fact, combined with the character of the discharges, satisfied us that there was serious organic lesion. Resort was had to eminent counsel in Philadelphia, by whose opinion our diagnosis was confirmed; and from that time but two principal indications were followed in the treatment pursued, *i. e.* supporting the patient's strength by tonics and nourishment, and holding the discharges in check by astringents.

On Sunday, March 2d, two weeks from the first attack, a third occurred; the discharge consisting from this time almost entirely of blood, fresh or in clots, discharged by the mouth.

These attacks were repeated occasionally till Sunday, March 16th, when, after a gush of blood from the mouth he sank rapidly, and died within an hour, just four weeks from the commencement of his illness.

The case was aggravated by ascites and suppression of urine during the last week, causing much suffering to the patient; these were, however, much relieved by appropriate treatment.

His mind was remarkably clear and calm through the whole time.

No exciting cause of this attack is known, except it be attributed to severe falls on the ice while skating a day or two previous.

We were indebted to the kindness of Drs. S. Weir Mitchell, and John Kane, of Philadelphia, for a very accurate and careful examination of the body.

*Autopsy* twenty-four hours after death. About eight pints of water in the peritoneal cavity; no abnormal collection in the thorax; the stomach filled with clotted blood. The tissues of the whole system white and bloodless, except a slight congestion near the cardiac orifice of the stomach.

A tumour on the stomach at the cardiac orifice about the size of a hen's egg, longitudinally divided, consisting of enlarged vessels filled with clots of blood; the largest spheroidal, and about three-quarters of an inch in diameter. These were traced through various convolutions into the gastric vein. These vessels seem to be perforated by minute orifices into the stomach.

The lymphatics about the pancreas and spleen were engorged and hypertrophied.

The investing membrane of the spleen was somewhat granular, and presented the appearance and feel called waxy, also shrunken. That organ was of natural size and its substance healthy.

There was no abnormal appearance of the vocal organs, except a slight thickening of the vocal chords.

Nothing more of interest was discovered.